## COMBINED DECLARATION AND POWER OF ATTORNEY (BY INVENTOR) FOR PATENT APPLICATION

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DECONTAMINATING LAWN VEHICLES AND TREE SHREDDERS the specification of which is attached hereto unless the following box is checked:. was filed on in United States Application Number or PCT International Application \_ and was amended on \_ \_\_\_\_\_ (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim the benefit under 35 U.S.C. §119(e) of any United States Provisional applications listed below: (Application Number) (Filing date) I hereby claim benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application. (Application No.) (Filing Date) (Status - pa tented, pending, abandoned) **POWER OF ATTORNEY (BY INVENTOR)** I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: All attorneys and agent listed under PTO Customer No. 021324 Address all telephone calls to Laura G. Barrow at Ph no. (239) 949-6989 Address all correspondence to: Laura G. Barrow, Esq. HAHN LOESER + PARKS, LLP 1225 West Market Street Akron, OH 44313-7188 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the Untied States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Full name of sole or first inventor (given name, family name): Travis Lofton Inventor's signature: mavis C. Ro Date: Residence: Lehigh Acres, FL Citizenship: USA Post Office Address: 613 Hamilton Ave., Lehigh Acres, Florida, 33972-4533 Full name of joint second inventor (given name, family name): Inventor's signature: Date: Residence: Citizenship: \_

Post Office Address: